MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09/464.767   FILING DATE 12/16/99

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51		1				
2		1					52						
3	1						53						
4	1						54						
5		1					55						
6		1					56						
7		1					57						
8		1					58						
9		1					59						
10							60						
11		1					61						
12	1						62						
13		1					63						
14	1						64						
15		1					65						
16		1					66						
17		1					67						
18		5					68						
19		1					69						
20		1					70						
21	1						71						
22		1					72						
23		2					73						
24	1		1				74						
25							75						
26				1			76						
27							77						
28			1				78						
29			1				79						
30							80						
31			1				81						
32				1			82						
33				1			83						
34				1			84						
35							85						
36			1				86						
37				1			87						
38							88						
39				2			89						
40							90						
41			1				91						
42			1				92						
43				1			93						
44							94						
45			1				95						
46				1			96						
47			1				97						
48			1				98						
49			1				99						
50				1			100						
TOTAL IND.	7						TOTAL IND.	14					
TOTAL DEP.	22						TOTAL DEP.	14					
TOTAL CLAIMS	29						TOTAL CLAIMS	25					

PTO-1360 (3-78)   *MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT of COMMERCE
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